

1/2 SUB SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.L.P.E. CLASSIFIER	<i>DP</i>	<i>45</i>	<i>7/26</i>
FORMALITY REVIEW	<i>DP</i>		<i>16 Jan 99</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 ○ Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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